

CLIPPERS WINTER SWIM TEAM

2010-2011

SWIMMERS NAME_____ **AGE** ____ **SEX** ____

ADDRESS_____ **TOWN** _____ **ZIP** _____

DATE OF BIRTH_____ **TEL #** _____

PARENT/GUARDIANS NAME _____

EMAIL ADDRESS _____

HAVE YOU EVER BEEN ON THE CLIPPERS TEAM BEFORE? YES ____ **NO** ____

REGISTRATION FEE....

\$175.00 PER SWIMMER WITH A POOL MEMBERSHIP

\$190.00 PER RESIDENT SWIMMER WITHOUT A MEMBERSHIP

\$215.00 PER NON RESIDENT WITHOUT A MEMBERSHIP

\$250.00 PER FAMILY LIMIT WITH A MEMBERSHIP

PLEASE NOTE...SWIMMERS AGE AS OF NOVEMBER 1, 2010 DESIGNATES HIS OR HER AGE GROUP....

PLEASE NOTE.....THERE ARE NO REFUNDS AFTER DECEMBER 1, 2010.....

BY MY SIGNATURE, I HEREBY RELEASE THE TOWN OF DEDHAM, PARKS & RECREATION DEPARTMENT FROM ANY LIABILITY REGARDING INJURY WHILE PARTICIPATING IN THIS PROGRAM...

PARENT /GUARDIANS SIGNATURE _____

DATE _____